## FORM D

#### **UNITED STATES** SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

SEC Mail Processing Section

# FORM D

JUN 11 2008

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6) AND/OD

OMB Number 3235-0076 Expires: May 31, 2008 Estimated average burden hours per response...

SEC USE ONLY

Serial

Prefix

Washington, DC 110 UNIFORM LIMITED OFFERING EX	KEMPTION	L L
Name of Offering (  check if this is an amendment and name has changed, and indicate of Series A Convertible Preferred Stock	change.)	
Filing Under (Check box(es) that apply): ☐ Rule 504 ☐ Rule 505 ☒ Rule 506 ☐	Section 4(6) ULOE	
Type of Filing: New Filing Amendment		
A. BASIC IDENTIFICATION DAT	TA	
1. Enter the information requested about the issuer		
Name of Issuer ( check if this is an amendment and name has changed, and indicate change	ge.) Affinity VideoNet, Inc.	
Address of Executive Offices (Number and Street, City, State, Zip Code) 110 Cook Street, Suite 212, Denver, CO 80206	Telephone Number (Including (303) 321-2777	Area Code)
Address of Principal Business Operations (Number and Street, City, State, Zip Code) 7 (if different from Executive Offices) 65 Eastern Avenue, Essex, MA 01929	Telephone Number (Includ (978) 768-7480	
Brief Description of Business Provider of videoconferencing technologies		08052231
Type of Business Organization  ☐ corporation ☐ limited partnership, already formed ☐ business trust ☐ limited partnership, to be formed	other (please speci	ify):
Month Year Actual or Estimated Date of Incorporation or Organization: [0]5] [0]8]  Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbrev CN for Canada; FN for other foreign jurisdi		JUN 1 6 2008
GENERAL INSTRUCTIONS Federal:		MONIOUN KEUIEKO

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for the sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

## **ATTENTION**

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

#### A. BASIC IDENTIFICATION DATA 2. Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Beneficial Owner Executive Officer ☑ Director General and/or Managing Partner Full Name (Last name first, if individual): Holst, Peter Business or Residence Address (Number and Street, City, State, Zip Code): 110 Cook Street, Suite 212, Denver, CO 80206 ☑ Director Check Box(es) that Apply: ☐ Promoter ☑ Beneficial Owner Executive Officer ☐ General and/or Managing Partner Full Name (Last name first, if individual): Ambraziunas, Bryce Business or Residence Address (Number and Street, City, State, Zip Code): 110 Cook Street, Suite 212, Denver, CO 80206 Check Box(es) that Apply: Promoter ☐ Beneficial Owner ☐ Executive Officer ☑ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual): Franson, Michael Business or Residence Address (Number and Street, City, State, Zip Code): 1400 Sixteenth Street, Suite 350, Denver, CO 80202 Check Box(es) that Apply: Promoter ☑ Beneficial Owner ☐ Executive Officer Director ☐ General and/or Managing Partner Full Name (Last name first, if individual): Tamarack Connection, Inc. Business or Residence Address (Number and Street, City, State, Zip Code): 7 DeSoto Road, Essex, MA 01929 Check Box(es) that Apply: ☐ Promoter ☑ Beneficial Owner Executive Officer Director ☐ General and/or Managing Partner Full Name (Last name first, if individual): Carlson, David Business or Residence Address (Number and Street, City, State, Zip Code): 7 DeSoto Road, Essex, MA 01929 Check Box(es) that Apply: ☐ Promoter ☑ Beneficial Owner Executive Officer □ Director General and/or Managing Partner Full Name (Last name first, if individual): Carlson, Linda Business or Residence Address (Number and Street, City, State, Zip Code): 7 DeSoto Road, Essex, MA 01929 Check Box(es) that Apply: Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Managing Partner

(Use blank sheet, or copy and use additional copies of this sheet, if necessary.)

Full Name (Last name first, if individual):

Business or Residence Address (Number and Street, City, State, Zip Code):

		47		B. Il	NFORMAT	TION ABO	UT OFFEI	RING				
1. Has the	e issuer sold	, or does the				dited invest					•••••	Yes No
2. What is	s the minim	um investm	ent that will	be accepte	d from any	individual?	•••••					\$ <u>N/A</u>
3. Does th	he offering p	ermit joint	ownership o	of a single u	ınit?	•••••	•••••		••••••	••••		Yes No
remune person than fiv	he information for so or agent of a ye (5) person only. NOT	olicitation of the broker or d to be liste	f purchasers lealer registe d are associ	in connecti ered with th	on with sale e SEC and/o	s of securiti or with a sta	es in the off te or states,	ering. If a p list the name	erson to be l e of the brok	listed is an a cer or dealer	ssociated. If more	
Full Name	(Last name	first, if indi	vidual)									
Business of	r Residence	Address (1	Number and	Street, City	, State, Zip	Code)						
Name of A	ssociated B	oker or De	aler		<del></del>		<del></del>					
	hich Person "All States"											☐ All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[ FL ]	[GA]	[ HI ]	[ ID ]
[ IL ]	[ IN ]	[ IA ]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[ MI ]	[MN]	[MS]	[MO]
[MT]	[ NE ]	[NV]	[NH]	[ NJ ]	[NM]	[ YY ]	[NC]	[ND]	[OH]	{OK}	[OR]	[ PA ]
[ RI ]	[ SC ]	[ SD ]	[TN]	[TX]	[UT] 	[VT]	[VA]	[WA]	[WV]	{ WI }	[WY]	[ PR ]
Full Name	(Last name	first, if indi	vidual)									
Business or	r Residence	Address (N	Number and	Street, City	, State, Zip	Code)						
Name of A	ssociated B	noker or De	aler		· <u> </u>	<del></del>	<u> </u>					
	hich Person										•••••	☐ All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[ HI ]	[ ID ]
[IL]	[ IN ]	[ IA ]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[ MI ]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[ [ [ [ [ ]	[NM]	[NY]	[NC]	[ND]	[0H]	[OK]	[OR]	[ PA ]
[ RI ]	[ SC ]	[ SD ]	[TN]	[ TX ]	[UT]	[VT]	[VA]	[WA]	[WV]	[ WI ]	[WY]	[ PR ]
Full Name	(Last name	first, if indi	vidual)									
Business of	r Residence	Address (N	Number and	Street, City	, State, Zip	Code)	<del></del> _				• •	
Name of A	ssociated B	roker or De	aler				<u> </u>					
	/hich Person "All States									••••		☐ All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[ HI ]	[ ID ]
[ IL ]	[ IN ]	[ IA ]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[ MI ]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[ NJ ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[ RI ]	[SC]	[SD]	[TN]	[XT]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[ PR ]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

, 2 , 2	· 63	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF	PROCEEDS	, #1
1.	En	ter the aggregate offering price of securities included in this offering and the total amount already sold. ter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\sigma\) and icate in the columns below the amounts of the securities offered for exchange and already exchanged.		
		Type of Security	Aggregate Offering Price	Amount Already Sold
		Debt		\$\$
		Convertible Securities (including warrants)	\$	\$ \$
		Total	\$ 2,450,000	\$ 2,450,000
2.	and per	ter the number of accredited and non-accredited investors who have purchased securities in this offering in the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of sons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. ter "0" if answer is "none" or "zero."		
			Number Investors	Aggregate Dollar Amount of Purchases
		Accredited Investors	16	\$ 2,450,000
		Non-accredited Investors		<b>s</b>
		Total (for filings under Rule 504 only)		\$
		Answer also in Appendix, Column 4, if filing under ULOE.		
3.	by	his filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of urities in this offering. Classify securities by type listed in Part C - Question 1.		
		Type of offering	Type of Security	Dollar Amount Sold
		Rule 505		\$
		Regulation A		\$
		Total		\$
4.	a.	Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		<u> </u>
		Transfer Agent's Fees		s
		Printing and Engraving Costs		\$
		Legal Fees		\$ 20,000
		Accounting Fees		\$
		Engineering Fees		\$
		Sales Commissions (specify finders' fees separately)	<del></del>	\$
		Other Expenses (identify)		\$
		Total	<u></u>	• 20.000

C. OFFERING PRICE, N	UMBER OF INVESTORS, EXPENSES AND	USE OF PROCEEDS	• .
total expenses furnished in response to Part	offering price given in response to Part C - Ques C - Question 4.a. This difference in the "adjuste	d gross	\$2,430,000
	any purpose is not known, furnish an estimate an the payments listed must equal the adjusted gross	d check	
		Payments to Officers, Directors, & Affiliates	Payments To Others
Salaries and Fees		□ <b>\$</b>	□ <b>s</b>
	of machinery and equipment		□ \$
	nd facilities		□ s
Acquisition of other businesses (including that may be used in exchange for the assets	he value of securities involved in this offering or securities of another issuer pursuant to a	<b>\$</b>	<b>≤</b> \$ 1,500,000
Repayment of indebtedness		□ \$	□ <b>s</b>
Working capital		□ \$	<b>≤</b> \$ 930,000
Other (specify):			
		□s	Пs
			<b>≥</b> \$ 2,430,000
	1)		,430,000
, ,	•		
and the second s	新元素 D. FEDERAL SIGNATURE		
The issuer has duly caused this notice to be signed signature constitutes an undertaking by the issuer to information furnished by the issuer to any non-accre	o furnish to the U.S. Securities and Exchange C dited investor pursuant to paragraph (b)(2) of Ru	ommission, upon writter lle 502.	
Affinity VideoNet, Inc.	So Jam	Date 4, 2008	
Name of Signer (Print or Type) Peter Holst	tle of Signer (Print or Type) Chief Executive Officer PETER	J. HOLST	
	ATTENTION		

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

	IL SUADESIGNATURE
1.	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?
2.	The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239.500) at such times as required by state law.
3.	The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
4.	The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform Limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.
	e issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned by authorized person.
Is.	Signature  Date  Date  Date

Issuer (Print or Type) Affinity VideoNet, Inc.	Signature Date June 4, 2008	
Name of Signer (Print or Type) Peter Holst	Title (Prints Type) Cinel Executive Officer PETER J HOLST	

### Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

# APPENDIX

1	2 3					5 Disqualification			
	Intend To non-a Investors (Part B-	ccredited s in State	Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of investor and Amount purchased in State (Part C-Item 2)			under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)		
State	Yes	No	Series A Convertible Preferred Stock	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL_								ļ	
AK									
AZ									
AR_						<u> </u>			
CA									·
со		х	\$2,450,000	16	\$2,450,000	0	0		х
CT						-			
DE									
DC									
FL_									
_GA									
ні									
ID									
IL							,		
IN									
IA_									<u> </u>
KS									
KY									
LA									
ME	<u> </u>							ļ <u>.</u>	
MD_									
MA					_				
MI _									
MN									
MS									
мо									
МТ									
NE_							<u> </u>		

# **APPENDIX**

1	Type of security and aggregate offering price offered in state (Part B-Item 1)  To non-accredited offered in state (Part C-Item 1)  Series A			Type of investor and Amount purchased in State (Part C-Item 2)				5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No	Convertible Preferred Stock	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
NV_									
NH									
NJ									ļ
NM_									
NY									
NC _								<u> </u>	<u> </u>
NY									
NC^									
ND									
ОН									
ок									
OR	ļ	ļ							
PA									
RI									
sc									
SD									
TN									ļ
TX	ļ								
UT		ļ						<u> </u>	<u> </u>
VT									
VA						_			<u> </u>
WA_								<u> </u>	
wv									ļ
WI									
WY									
PR							ND		